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for nurses, and one that would be most interesting and rich in possibilities and opportunities, especially for the older nurses. I hope the nurses who are engaged in the work in Boston will favor us with an article in the near future.

Illinois.

A. A. N.

[In the May number of the JOURNAL Miss Foley will devote the pages of the Visiting Nurse Department to a survey of the work being done in this line in various places, and in the same issue we shall publish, if possible, a paper on "What One Association is Doing for its Mothers," by Francina Freese, of the Caroline Rest, Hartsdale, N. Y.—Ed.]

### TUBERCULOSIS NURSING

DEAR EDITOR: I should very much like a few opinions from various nurses as to why so many of them object to doing tuberculosis nursing. During the past few months we have had occasion to send to various registries both here and in New York for nurses, and they ask whether there is any danger of getting infected and other ridiculous questions of the same import. It is true that caring for tuberculosis patients has its disagreeable side, but how many nurses object to cases of cancer or venereal disease which are found in other hospitals? I have been doing tuberculosis nursing for over a year and am sure that caring for these patients in open wards and shacks, with plenty of fresh air and sunshine, is far from being as dangerous as is caring for patients in comparatively closed wards, where there are generally patients who are more or less tubercular.

Connecticut.

E. F. G.

### SOME OLD-TIME METHODS

DEAR EDITOR: I have just come from an obstetrical case where the physician was a man well along in years who has given up most of his practice, but my patient was one of his babies and he has watched her grow up. He was like her father, patient and encouraging! He was not very clean and looked shocked when he was about to tie the baby's cord and I offered him my sterile cord ties. He shook his head and pulled two pieces of common twine from the button hole of his vest and used them. I was as shocked as he, but said nothing and took occasion to soak the string thoroughly with bichloride, 1-5000, when I bathed the baby, and then dried it thoroughly before powdering and putting on the dressing. The doctor made no calls after the confinement, but marvelled that the patient had no rise of temperature and wanted me to take another case for him.

New York.

F. L.

### HOSPITAL GOSSIP

DEAR EDITOR: I picked up a helpful idea from a pupil-nurse the other day. Her class has just organized and, recognizing the evil of hospital gossip, they have chosen a novel way of trying to suppress it. A little piece of wood, the size of a visiting card, on which is written, "Gabby, don't gossip," is quietly slipped into the hand of any class member who is overheard talking unkindly or disrespectfully of another, especially of the officers of the institution.